

UNITED STATES DISTRICT COURT  
for the  
Eastern District of Michigan

Beverly Ann Bricker,

*Plaintiff,*

v.

Case No. 2:13-cv-10478-RHC-LJM  
Hon. Robert H. Cleland

New England Compounding Pharmacy,  
Inc.,

*Defendant.*

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**SUMMONS IN A CIVIL ACTION**

To: New England Compounding Pharmacy, Inc.

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) - or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) - you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Christopher R. Sciotti  
24825 Little Mack Avenue  
St. Clair Shores, MI  
48080

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: s/T McGovern

*Signature of Clerk or Deputy Clerk*



Date of Issuance: February 7, 2013

**Summons and Complaint Return of Service**

Case No. 2:13-cv-10478-RHC-LJM  
Hon. Robert H. Cleland

A copy of the Summons and Complaint has been served in the manner indicated below:

Name of Defendant Served: New England Compounding Pharmacy, Inc.

Date of Service: \_\_\_\_\_

**Method of Service**

\_\_\_\_ Personally served at this address:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ Left copies at defendant's usual place of abode with (name of person):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ Other (specify):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ Returned unexecuted (reason):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Service Fees:** Travel \$\_\_\_\_\_ Service \$\_\_\_\_\_ Total \$\_\_\_\_\_

**Declaration of Server**

I declare under the penalty of perjury that the information contained in this Return of Service is true and correct.

Name of Server: \_\_\_\_\_

Signature of Server: \_\_\_\_\_

Date: \_\_\_\_\_

Server's Address:  
\_\_\_\_\_  
\_\_\_\_\_